

16698 U.S. PTO
06/25/03

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PTO/SB/05 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 58333.0005
First Inventor BAUMAN, Barry B.
Title Container Dispenser
Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☐ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 23]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 13]
5. Oath or Declaration [Total Pages 36] MS
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement of Power of Attorney (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449
13. ☐ Preliminary Amendment
14. ☐ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information:

Examiner

Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

(insert Customer Number or Bar Code Label here)

or ☐ Correspondence address below

Name

24629

PATENT TRADEMARK OFFICE

Address

City

State

Zip Code

Country

Telephone

Fax

Name (Print/Type)

Daryl W. Schnurr

Registration No. (Attorney/Agent)

28,569

Signature

Date

June 24, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number
58333.0005

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

| FOR | NUMBER FILED | NUMBER EXTRA |
|---|-----------------|--------------|
| BASIC FEE (37 CFR 1.16(a)) | | |
| TOTAL CLAIMS (37 CFR 1.16(c)) | 48 minus 20 = * | 28 |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 2 minus 3 = * | 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | |

| RATE | FEE |
|----------|--------|
| | \$375. |
| x \$9. = | 252. |
| x ____ = | n/a |
| + 140 = | 140. |
| TOTAL | 767.00 |

| RATE | FEE |
|-------------|---------|
| | \$ ____ |
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------|---|---|-------|---|------------------|
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

| RATE | ADDI- TIONAL FEE |
|-------------|------------------------|
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |
| ADDIT. FEE | |

| RATE | ADDI- TIONAL FEE |
|-------------|------------------------|
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |
| ADDIT. FEE | |

(Column 1)

(Column 2)

(Column 3)

ADDIT. FEE

OR

ADDIT. FEE

| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------|---|---|-------|---|------------------|
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

| RATE | ADDI- TIONAL FEE |
|-------------|------------------------|
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |
| ADDIT. FEE | |

| RATE | ADDI- TIONAL FEE |
|-------------|------------------------|
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |
| ADDIT. FEE | |

(Column 1)

(Column 2)

(Column 3)

ADDIT. FEE

OR

ADDIT. FEE

| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------|---|---|-------|---|------------------|
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

| RATE | ADDI- TIONAL FEE |
|-------------|------------------------|
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |
| ADDIT. FEE | |

| RATE | ADDI- TIONAL FEE |
|-------------|------------------------|
| x \$ ____ = | |
| x ____ = | |
| + ____ = | |
| TOTAL | |
| ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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MILLER THOMSON LLP

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File No. 58333.0005

June 24, 2003

MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SENT BY COURIER

Dear Sir:

RE: New Application by Barry B. Bauman
Title: Container Dispenser
Provisional Patent Application # 60/391,408
Confirmation No. 5280

We are enclosing herewith the following documentation for process:

1. Utility Patent Application Transmittal;
2. Patent Application Fee Determination Record;
3. Declaration for Utility Patent Application;
4. Power of Attorney or Authorization of Agent;
5. Specification including abstract and claims;
6. 13 sheets of formal drawings on paper; and
7. Our firm cheque in the amount of U.S. \$767.00 representing your filing fee herein as follows:

| | | |
|-----|---------------------------|----------|
| (a) | Basic Fee | \$375.00 |
| (b) | Independent Claims -2 | n/a |
| (c) | Claims - total of 48 | 252.00 |
| (d) | Multiple Dependent Claims | 140.00 |

We look forward to receiving your official filing receipt for the above application in due course.

Yours very truly,

MILLER THOMSON LLP

Per: 
Daryl W. Schnurr

DWS/br
encl.